	Case 0.19-bk-04030-CC3	1 11EG 01/11/13	rage I o	31	
Fill	I in this information to identify your case:				
Deb	ebtor 1 Aaron C Hamlin				
Dob		ast Name			
		ast Name	_		
Unit	nited States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA		_		
Cas	ase number 6:19-bk-04030				
(if kno	known)			_	if this is an ded filing
Off	fficial Form 106Sum				
	ummary of Your Assets and Liabilities and Cert				12/15
infor	as complete and accurate as possible. If two married people are filing ormation. Fill out all of your schedules first; then complete the information original forms, you must fill out a new <i>Summary</i> and check the box art 1: Summarize Your Assets	ation on this form. If you are		ed schedu	les after you file
4	Calculus A/D. Dramatty (Official Form 406A/D)			value o	what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B			\$	146,147.00
	1b. Copy line 62, Total personal property, from Schedule A/B			\$	9,723.56
	1c. Copy line 63, Total of all property on Schedule A/B			\$	155,870.56
Part	art 2: Summarize Your Liabilities				
					<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official F 2a. Copy the total you listed in Column A, Amount of claim, at the bottom		Schedule D	\$	180,214.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106 3a. Copy the total claims from Part 1 (priority unsecured claims) from lin			\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from	n line 6j of Schedule E/F		\$	89,865.89
		Your to	otal liabilities	\$	270,079.89
Part	art 3: Summarize Your Income and Expenses				
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I			\$	1,634.83
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J			\$	3,847.49
Part	art 4: Answer These Questions for Administrative and Statistical Rec	cords			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this banks to the form.	oox and submit this form to the	e court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?				
	Your debts are primarily consumer debts. Consumer debts are thousehold purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statis			a personal,	family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

#### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 2 of 57

Debtor 1	Aaron C Hamlin			
Debtor 2	Kimberly E Hamlin	Case number (if known)	6:19-bk-04	1030

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,820.97

Ocopy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	40,476.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	40,476.00

#### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 3 of 57

Fill in this inforr	mation to identify your case and	this filing:				
Debtor 1	Aaron C Hamlin					
<b>5</b> 1		dle Name Last Name				
Debtor 2 (Spouse, if filing)	Kimberly E Hamlin First Name Midd	dle Name Last Name				
United States Ba	inkruptcy Court for the: MIDDLE	DISTRICT OF FLORIDA				
				_		
Case number _	6:19-bk-04030			☐ Check if this is an amended filing		
Official Fo	rm 106A/B					
	e A/B: Property			12/15		
	<u> </u>	t an asset only once. If an asset fits in more than one	category, list the asset in			
Answer every ques  Part 1: Describe		Other Real Estate You Own or Have an Interest In				
. Do you own or h	nave any legal or equitable interest in	any residence, building, land, or similar property?				
☐ No. Go to Par	† 2					
_	s the property?					
1.1 <b>2701 Δ</b> ησε	el Mist Court	What is the property? Check all that apply	5			
	if available, or other description	_ ☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secure	educt secured claims or exemptions. Put unt of any secured claims on Schedule D: who Have Claims Secured by Property.		
		Condominium or cooperative	Creditors Who Have Clair			
		☐ Manufactured or mobile home				
Mascotte	FL 34753-0000	Land	Current value of the entire property?	Current value of the portion you own?		
City	State ZIP Code	☐ Investment property	\$146,147.00	\$146,147.00		
		☐ Timeshare ☐ Other	Describe the nature of y	our ownership interest		
		<b>—</b> 011101				
		Who has an interest in the property? Check one	a life estate), if known.	ancy by the entireties, or		
		Who has an interest in the property? Check one  Debtor 1 only		ancy by the entireties, or		
Lake		Debtor 1 only Debtor 2 only	a life estate), if known.	ancy by the entireties, or		
<b>Lake</b> County		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	a life estate), if known.  Fee simple  Check if this is com			
		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	a life estate), if known.  Fee simple  Check if this is com (see instructions)			
		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	a life estate), if known.  Fee simple  Check if this is com (see instructions)			
		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item	a life estate), if known.  Fee simple  Check if this is com (see instructions)			
		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this itemproperty identification number:	a life estate), if known.  Fee simple  Check if this is com (see instructions)	ancy by the entireties, or		
County	ar value of the portion you own f	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this itemproperty identification number:	a life estate), if known.  Fee simple  Check if this is com (see instructions)  m, such as local			

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 4 of 57

		Aaron C Har Kimberly E I			Case number (	if known)	6:19-bk-04030
3. <b>C</b>	ars, vans	s, trucks, tract	tors, sport utility ve	hicles, motorcycles			
	] No						
	Yes						
3.1	1 Make:	Nissan		Who has an interest in the property? Check one			ed claims or exemptions. Put ecured claims on Schedule D:
	Model:	Altima		Debtor 1 only	Creditor	s Who Have	Claims Secured by Property.
	Year: Approxi	2012 imate mileage:	143,820	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		value of the roperty?	e Current value of the portion you own?
		nformation:		At least one of the debtors and another		,	
	Co-ov	1N4AL2AP2 vned Joyce er-in-law)		☐ Check if this is community property (see instructions)		\$2,625.0	\$1,312.50
5 /	No Yes  Add the d	lollar value of	the portion you ow	n for all of your entries from Part 2, includin	ng any entries fo	r	\$4.242.E0
4	pages you	u have attach	ed for Part 2. Write t	that number here		=>	\$1,312.50
Pari	3: Descr	ribe Your Perso	nal and Household Ite	ems			
				erest in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examples. ⊒ No	d goods and f : Major applian escribe	urnishings nces, furniture, linens,	china, kitchenware			
			50, chairs (4) 10	seat 50, coffee table 10, TV Stand 25, d 0, Queen bed (2) 80, dresser (4) 200, fu lesk 30, lawn mower 30, lawn items 20, 0, tools 25	III size bed		\$795.00
	□No	: Televisions a including cell	nd radios; audio, vide phones, cameras, m	eo, stereo, and digital equipment; computers, p ledia players, games	rinters, scanners	; music coll	ections; electronic devices
	■ Yes. D	escribe					
			TV (3) 400, fridg dryer 150	e 150, microwave 50, computer 100, wa	asher &		\$850.00
	Examples. ■ No		figurines; paintings, ons, memorabilia, col	prints, or other artwork; books, pictures, or othe llectibles	er art objects; sta	mp, coin, o	r baseball card collections;
9. <b>E</b>	quipmen	t for sports a	graphic, exercise, an	d other hobby equipment; bicycles, pool tables	s, golf clubs, skis;	canoes an	d kayaks; carpentry tools;

### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 5 of 57

Debtor 1 Debtor 2	Aaron C Ha Kimberly E				Case number (if known)	6:19-bk-04030
■ Yes.	. Describe					
		Baseba	ıll cards			\$200.00
■ No		es, shotguns	s, ammunition, and r	related equipment		
☐ No		clothes, furs	, leather coats, desi	gner wear, shoes, accessories		
		Clothin	g 100			\$100.00
☐ No		ewelry, cost	ume jewelry, engag	ement rings, wedding rings, heirloor	m jewelry, watches, gems, g	old, silver
		Costun	ne jewelry 30, we	edding bands 100		\$130.00
14. <b>Any o</b> ■ No □ Yes. 15. <b>Add</b>	. Give specific in	nformation	 our entries from Pa	not already list, including any hea		\$2,075.00
	escribe Your Fina wn or have any		uitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		·	, ,	me, in a safe deposit box, and on ha	and when you file your petition	on
	,	•		unts; certificates of deposit; shares i with the same institution, list each.	in credit unions, brokerage h	nouses, and other similar
_				Institution name:		
		17.1.	Checking	SunTrust acct #5391		\$5,473.27
		17.2.	Checking	SunTrust acct #2661		\$795.28

Official Form 106A/B

### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 6 of 57

Debtor 1 Debtor 2	Aaron C Ham Kimberly E Ha				Case number (if known)	6:19-bk-04030
		17.3.	Savings	SunTrust acct #0095		\$7.00
		17.4.	Savings	SunTrust acct #0103		\$60.51
Exam	s, <b>mutual funds</b> , <b>o</b> ples: Bond funds, i			okerage firms, money market accoun	ots	
■ No □ Yes.			Institution or issuer	name:		
joint	ublicly traded sto venture	ck and	interests in incorp	orated and unincorporated busine	sses, including an interes	t in an LLC, partnership, and
■ No	Give specific info	rmation	about them			
□ 1es.	. Give specific intol		me of entity:		% of ownership:	
Nego	tiable instruments in	nclude p	personal checks, cas	otiable and non-negotiable instrum shiers' checks, promissory notes, and ansfer to someone by signing or deliv	d money orders.	
	Give specific infor		about them uer name:			
Exam ■ No	ment or pension a ples: Interests in IR	RA, ERIS	SA, Keogh, 401(k), 4	403(b), thrift savings accounts, or oth	er pension or profit-sharing	plans
Yours		deposit	s you have made so	o that you may continue service or us public utilities (electric, gas, water), t		ies, or others
■ No	, , , , , , , , , , , , , , , , , , ,			Institution name or individual:	·	
		a perio	dic payment of mone	ey to you, either for life or for a numb		
■ No □ Yes.	lssı	uer nam	e and description.		,	
26 U.S.	ets in an education .C. §§ 530(b)(1), 52			ualified ABLE program, or under a	qualified state tuition pro	gram.
■ No □ Yes.	Inst	titution r	name and descriptio	n. Separately file the records of any i	nterests.11 U.S.C. § 521(c):	
25. Trusts ■ No	s, equitable or futu	ıre inte	rests in property (c	other than anything listed in line 1)	, and rights or powers exe	rcisable for your benefit
	Give specific info	rmation	about them			
				nd other intellectual property eds from royalties and licensing agree	ements	
☐ Yes.	Give specific info	rmation	about them			
			r general intangibl lusive licenses, coop	es perative association holdings, liquor l	icenses, professional licens	es
	Give specific info	rmation	about them			
Money or	property owed to	you?				Current value of the portion you own?  Do not deduct secured

### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 7 of 57

	ebtor 1 ebtor 2	Aaron C Hamlin Kimberly E Hamlin	Case number (if known)	6:19-bk-04030
				claims or exemptions.
28	■ No	unds owed to you  Give specific information about them, including whether you already file	ad the returns and the tay years	
	□ 165.	Give specific information about them, including whether you already me	a the returns and the tax years	
29	■ No	support  les: Past due or lump sum alimony, spousal support, child support, mai  Give specific information	intenance, divorce settlement, property	settlement
30		imounts someone owes you  les: Unpaid wages, disability insurance payments, disability benefits, si benefits; unpaid loans you made to someone else	ick pay, vacation pay, workers' comper	esation, Social Security
	☐ Yes.	Give specific information		
31		ts in insurance policies bles: Health, disability, or life insurance; health savings account (HSA); of	credit, homeowner's, or renter's insurar	се
	☐ Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
32	If you a	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance ne has died.	e policy, or are currently entitled to rece	vive property because
		Give specific information		
33		against third parties, whether or not you have filed a lawsuit or males: Accidents, employment disputes, insurance claims, or rights to sue		
	☐ Yes.	Describe each claim		
34	■ No	contingent and unliquidated claims of every nature, including coun	nterclaims of the debtor and rights to	set off claims
	⊔ Yes.	Describe each claim		
35	■ No	ancial assets you did not already list  Give specific information		
	<b>□</b> 163.	One specific information	1	
36		he dollar value of all of your entries from Part 4, including any entr ort 4. Write that number here	. • .	\$6,336.06
Pa	art 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. List	any real estate in Part 1.	
	Do you o	own or have any legal or equitable interest in any business-related property	?	
		to Falt 6.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or Har ou own or have an interest in farmland, list it in Part 1.	ve an Interest In.	
46	_ `	own or have any legal or equitable interest in any farm- or comme	ercial fishing-related property?	
	☐ Yes.	Go to line 47.		

### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 8 of 57

	otor 1 Aaron C Hamlin otor 2 Kimberly E Hamlin		Case number (if known)	6:19-bk-04030
Part	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
_	Do you have other property of any kind you did not already lis Examples: Season tickets, country club membership	st?		
	■ No □ Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write t	that number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$146,147.00
56.	Part 2: Total vehicles, line 5	\$1,312.50		
57.	Part 3: Total personal and household items, line 15	\$2,075.00		
58.	Part 4: Total financial assets, line 36	\$6,336.06		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$9,723.56	Copy personal property to	stal <b>\$9,723.56</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$155 870 56

Debtor 1 Aaron C Hamlin
First Name Middle Name Last Name
Debtor 2 Kimberly E Hamlin
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA
Case number 6:19-bk-04030

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the

0 1	emption to a particular dollar amount and the the applicable statutory amount.  Int 1: Identify the Property You Claim as E		ty is de	etermined to exceed that amoun	t, your exemption would be limited			
1.	You are claiming state and federal nonbank	set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B Brief description of the property and line on Schedule A/B that lists this property	that you claim as exe Current value of the portion you own Copy the value from Schedule A/B	Amo	ill in the information below.  ount of the exemption you claim  ck only one box for each exemption.	Specific laws that allow exemption			
	2012 Nissan Altima 143,820 miles VIN #1N4AL2AP2CN466478 Co-owned Joyce Hamlin (mother-in-law) Line from Schedule A/B: 3.1	\$1,312.50		\$1,312.50  100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(1)			
	Couch 50, love seat 50, coffee table 10, TV Stand 25, dining table 50, chairs (4) 100, Queen bed (2) 80, dresser (4) 200, full size bed 30, cabinet 25, desk 30, lawn mower 30, lawn items 20, BBQ grill 40, lawn patio 30, tools 25 Line from Schedule A/B: 6.1	\$795.00		\$795.00  100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(2)			
	TV (3) 400, fridge 150, microwave 50, computer 100, washer & dryer 150 Line from <i>Schedule A/B</i> : <b>7.1</b>	\$850.00		\$850.00  100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(2)			

**Baseball cards** 

Line from Schedule A/B: 9.1

\$200.00

Fla. Const. art. X, § 4(a)(2)

\$200.00

100% of fair market value, up to any applicable statutory limit

# Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 10 of 57

	bbtor 2 Kimberly E Hamlin			Case number (if known)	6:19-bk-04030
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Clothing 100 Line from Schedule A/B: 11.1	\$100.00		\$100.00	Fla. Const. art. X, § 4(a)(2)
	Line nom Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
	Costume jewelry 30, wedding bands	\$130.00		\$55.00	Fla. Const. art. X, § 4(a)(2)
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	Checking: SunTrust acct #5391 Line from Schedule A/B: 17.1	\$5,473.27		\$5,473.27	Fla. Stat. Ann. § 222.11(2)(b)
	Line Irom Schedule AVB. 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking: SunTrust acct #2661 Line from Schedule A/B: 17.2	\$795.28		\$795.28	Fla. Stat. Ann. § 222.11(2)(b)
	Line Ironi Schedule AVB. 17.2			100% of fair market value, up to any applicable statutory limit	
	Savings: SunTrust acct #0095 Line from Schedule A/B: 17.3	\$7.00		\$7.00	Fla. Stat. Ann. § 222.11(2)(b)
	Ellie Holli Genedale 74B. TTG			100% of fair market value, up to any applicable statutory limit	
	Savings: SunTrust acct #0103 Line from Schedule A/B: 17.4	\$60.51		\$60.51	Fla. Stat. Ann. § 222.11(2)(b)
	Ellic Holli Golleddie 7V Z. TT14			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 No			led on or after the date of adjustmen	t.)
	Yes. Did you acquire the property covered No	ed by the exemption w	ithin 1	,215 days before you filed this case?	)
	<del></del>				

Case 6.	19-bk-04030-CCJ	107/11/19 Pa	ige 11 01 57	
Fill in this information to identify	your case:			
Debtor 1 Aaron C Han	nlin Middle Name Last Name		-	
Debtor 2 Kimberly E First Name	Hamlin Middle Name Last Name		-	
United States Bankruptcy Court for	the: MIDDLE DISTRICT OF FLORIDA		-	
Case number (if known) 6:19-bk-04030			_	if this is an
Official Form 106D Schedule D: Credito	ors Who Have Claims Secure	d by Propert	у	12/15
	ble. If two married people are filing together, both are ed Il it out, number the entries, and attach it to this form. O			
1. Do any creditors have claims secure	nd by your property?			
_ •	nit this form to the court with your other schedules. Y	'ou have nothing also t	to roport on this form	
_		ou have nothing else i	to report on this form.	
Yes. Fill in all of the informat	ion below.			
Part 1: List All Secured Claims				
	nas more than one secured claim, list the creditor separately		Column B	Column C
	has a particular claim, list the other creditors in Part 2. As abetical order according to the creditor's name.	Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Bmw Financial Services	Describe the property that secures the claim:	\$17,360.00	Unknown	\$17,360.00
Creditor's Name	Automobile			
Attn: Bankruptcy				
Department	As of the date you file, the claim is: Check all that			
Po Box 3608	apply.			
Dublin, OH 43016	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
_	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or se car loan)	curea		
Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and anoth	<b>–</b>			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Opened	et			

3239

Last 4 digits of account number

Active

Date debt was incurred 8/08/17

### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 12 of 57

Debtor 1	Aaron C H	amlin		Cas	se number (if known)	6:19-bk-04030	
	First Name	Middle N	ame Last Name				
Debtor 2	Kimberly I	E Hamlin Middle N	ame Last Name	_			
	i ii st i vaine	Wildele 14	Last Name				
2.2 <b>Lo</b>	an Care Ser	vicing	Describe the property that secures	the claim:	\$150,275.00	\$146,147.00	\$4,128.00
Cred	ditor's Name		2701 Angel Mist Court Mas	cotte, FL			
			34753 Lake County PARCEL ID				
	tn: Consume	er	#10-22-24-0011-000-09900				
	lutions Box 8068		As of the date you file, the claim is	: Check all that			
	rginia Beach	VΔ 23450	apply.				
			Contingent				
Nurr	nber, Street, City, S	iale & Zip Code	☐ Unliquidated☐ Disputed				
Who owe	es the debt? C	heck one.	Nature of lien. Check all that apply.				
☐ Debtor	r 1 only		☐ An agreement you made (such as	mortgage or secure	ed		
☐ Debtor	•		car loan)	mongago or cocard			
_	r 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, m	echanic's lien)			
		tors and another	☐ Judgment lien from a lawsuit	,			
	k if this claim re		☐ Other (including a right to offset)				
	nunity debt		, ,				
		Opened					
		12/15 Last					
		Active					
Date debt	t was incurred	5/06/19	Last 4 digits of account nur	nber 1791			
1/31	ells Fargo Do	ealer			¢40 570 00	University	£42 E70 00
2.3 Se	rvices	ealer	Describe the property that secures	the claim:	\$12,579.00	Unknown	\$12,579.00
2.3 Se	•	ealer	Describe the property that secures Automobile	the claim:	\$12,579.00	Unknown	\$12,579.00
Cred	ditor's Name			the claim:	\$12,579.00	Unknown	\$12,579.00
Cred	rvices		Automobile  As of the date you file, the claim is		\$12,579.00	Unknown	\$12,579.00
Crec  Att	rvices ditor's Name tn: Bankrupt	tcy	Automobile  As of the date you file, the claim is apply.		\$12,579.00	Unknown	\$12,579.00
Att Po Irv	rvices ditor's Name tn: Bankrupt Box 19657	tcy 23	Automobile  As of the date you file, the claim is		<b>\$12,579.00</b>	Unknown	\$12,579.00
Att Po Irv	ervices ditor's Name tn: Bankrupt DBox 19657 line, CA 9262	tcy 23	Automobile  As of the date you file, the claim is apply.  Contingent		\$12,579.00	Unknown	\$12,579.00
Att Po Irv	ervices ditor's Name tn: Bankrupt DBox 19657 line, CA 9262	tcy 23 tate & Zip Code	As of the date you file, the claim is apply.  Contingent Unliquidated		\$12,579.00	Unknown	\$12,579.00
Att Po Irv	trices ditor's Name tn: Bankrupt b Box 19657 line, CA 9262 nber, Street, City, S	tcy 23 tate & Zip Code	Automobile  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.	: Check all that		Unknown	\$12,579.00
Att Po Irv Num	tn: Bankrupi b Box 19657 line, CA 9262 hber, Street, City, S es the debt? C	tcy 23 tate & Zip Code	Automobile  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan)	: Check all that		Unknown	\$12,579.00
Att Po Irv Num Who owe	tn: Bankrupi b Box 19657 line, CA 9262 hber, Street, City, S es the debt? C	tcy 23 tate & Zip Code heck one.	Automobile  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.	: Check all that		Unknown	\$12,579.00
Att Po Irv Num Who owe Debtoi Debtoi	trices ditor's Name tan: Bankrupt BBox 19657 line, CA 9262 aber, Street, City, S es the debt? C r 1 only r 2 only r 1 and Debtor 2	tcy 23 tate & Zip Code heck one.	Automobile  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan)	: Check all that		Unknown	\$12,579.00
Attl Po Irv Num  Who owe Debtoi Debtoi At leas Check	trices ditor's Name  th: Bankrupt BBox 19657 ine, CA 9262 aber, Street, City, S es the debt? C r 1 only r 2 only r 1 and Debtor 2 st one of the deb k if this claim re	tate & Zip Code heck one. only tors and another	Automobile  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan)  Statutory lien (such as tax lien, m.	: Check all that		Unknown	\$12,579.00
Attl Po Irv Num  Who owe Debtoi Debtoi At leas Check	trices ditor's Name tan: Bankrupt BBox 19657 ine, CA 9262 aber, Street, City, S es the debt? C r 1 only r 2 only r 1 and Debtor 2 st one of the deb	tate & Zip Code heck one. only tors and another	Automobile  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan)  Statutory lien (such as tax lien, multiplication) Judgment lien from a lawsuit	: Check all that		Unknown	\$12,579.00
Attl Po Irv Num  Who owe Debtoi Debtoi At leas Check	trices ditor's Name  th: Bankrupt BBox 19657 ine, CA 9262 aber, Street, City, S es the debt? C r 1 only r 2 only r 1 and Debtor 2 st one of the deb k if this claim re	tate & Zip Code heck one. only tors and another	Automobile  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan)  Statutory lien (such as tax lien, multiplication) Judgment lien from a lawsuit	: Check all that		Unknown	\$12,579.00
Attl Po Irv Num  Who owe Debtoi Debtoi At leas Check	trices ditor's Name  th: Bankrupt BBox 19657 ine, CA 9262 aber, Street, City, S es the debt? C r 1 only r 2 only r 1 and Debtor 2 st one of the deb k if this claim re	tcy 23 ttate & Zip Code heck one. only tors and another slates to a Opened 09/14 Last	Automobile  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan)  Statutory lien (such as tax lien, multiplication) Judgment lien from a lawsuit	: Check all that		Unknown	\$12,579.00
Att Po Irv Num  Who owe Debtoto Debtoto At least Check comm	trices ditor's Name tn: Bankrupi Box 19657 line, CA 9262 linber, Street, City, S es the debt? C r 1 only r 2 only r 1 and Debtor 2 st one of the deb k if this claim re munity debt	tcy 23 ttate & Zip Code heck one. only tors and another slates to a Opened 09/14 Last Active	As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan) Statutory lien (such as tax lien, m Judgment lien from a lawsuit Other (including a right to offset)	mortgage or secure		Unknown	\$12,579.00
Att Po Irv Num  Who owe Debtoto Debtoto At least Check comm	trices ditor's Name  th: Bankrupt BBox 19657 ine, CA 9262 aber, Street, City, S es the debt? C r 1 only r 2 only r 1 and Debtor 2 st one of the deb k if this claim re	tcy 23 ttate & Zip Code heck one. only tors and another slates to a Opened 09/14 Last	Automobile  As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan)  Statutory lien (such as tax lien, multiplication) Judgment lien from a lawsuit	mortgage or secure		Unknown	\$12,579.00
Att Po Irv Num  Who owe Debtoto Debtoto At least Check comm	trices ditor's Name tn: Bankrupi Box 19657 line, CA 9262 linber, Street, City, S es the debt? C r 1 only r 2 only r 1 and Debtor 2 st one of the deb k if this claim re munity debt	tcy 23 ttate & Zip Code heck one. only tors and another slates to a Opened 09/14 Last Active	As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan) Statutory lien (such as tax lien, m Judgment lien from a lawsuit Other (including a right to offset)	mortgage or secure		Unknown	\$12,579.00
Attleas Date debte	trices ditor's Name trices beautiful Bankrupt condended beautiful Bankrupt	tcy 23 tate & Zip Code heck one.  only tors and another elates to a  Opened 09/14 Last Active 11/07/16	As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan) Statutory lien (such as tax lien, m Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account nur	mortgage or secure echanic's lien)	ed		\$12,579.00
Att Po Irv Num  Who owe Debto Debto At leas Check comr	trices ditor's Name trices ditor's Name trices Description and Debtor 2 Description and Debtor 3 Description and Debtor 4 Descrip	tcy  23  tate & Zip Code  heck one.  only tors and another elates to a  Opened 09/14 Last Active 11/07/16	As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan) Statutory lien (such as tax lien, m Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account nuresolumn A on this page. Write that nuresolumn A on this page.	mortgage or secure echanic's lien)  aber 8600	ed \$180,214	.00	\$12,579.00
Add the If this is	trices ditor's Name trices ditor's Name trices Description and Debtor 2 Description and Debtor 3 Description and Debtor 4 Descrip	tcy 23 tate & Zip Code heck one.  only tors and another elates to a  Opened 09/14 Last Active 11/07/16	As of the date you file, the claim is apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as car loan) Statutory lien (such as tax lien, m Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account nur	mortgage or secure echanic's lien)  aber 8600	ed	.00	\$12,579.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 0.19-0K-04030	J-CCJ DUC 12 THEC	101/11/19 Fage 150	1 37
Fill in this	information to identify your case:			
Debtor 1	Aaron C Hamlin			
	First Name Middle	Name Last Name		
Debtor 2	Kimberly E Hamlin			
(Spouse if, filin	g) First Name Middle	Name Last Name		
United Stat	es Bankruptcy Court for the: MIDDLE D	ISTRICT OF FLORIDA		
Case numb	per 6:19-bk-04030			
(if known)				☐ Check if this is an
				amended filing
Official I	Form 106E/F			
	le E/F: Creditors Who Have	- Unsecured Claims		12/15
	ete and accurate as possible. Use Part 1 for c		Part 2 for creditors with NONPPIORI	
Schedule D: left. Attach th name and ca	Executory Contracts and Unexpired Leases ( Creditors Who Have Claims Secured by Propine Continuation Page to this page. If you have use number (if known).	erty. If more space is needed, copy to no information to report in a Part, o	he Part you need, fill it out, number	the entries in the boxes on the
	List All of Your PRIORITY Unsecured Cla			
1. Do any	creditors have priority unsecured claims agai	nst you?		
■ No. (	Go to Part 2.			
☐ Yes.				
Part 2:	List All of Your NONPRIORITY Unsecure	d Claims		
_ `	creditors have nonpriority unsecured claims a		dules.	
unsecur	of your nonpriority unsecured claims in the all ed claim, list the creditor separately for each clair e creditor holds a particular claim, list the other cr	n. For each claim listed, identify what t	ype of claim it is. Do not list claims alre	ady included in Part 1. If more
				Total claim
4.1 Ad	Idition Financial	Last 4 digits of account number	0002	\$8,027.00
At	npriority Creditor's Name tn: Bankruptcy Dept 00 Primera Blvd	When was the debt incurred?	Opened 09/16 Last Active 4/12/17	
	ke Mary, FL 32746			
	mber Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
_	o incurred the debt? Check one.	_		
_	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	☐ Student loans		
dek Is t	ot he claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you di	d not
IS (	•	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes		g pland, and other diffillal dobto	
Ц	res	Other. Specify Unsecured		

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Nor Att	ddition Financial	Lord A. Politon of control of control		
Att 100	and a decide a One of the de Manage	Last 4 digits of account number	0003	\$0.00
l a'	npriority Creditor's Name tn: Bankruptcy Dept 00 Primera Blvd ike Mary, FL 32746	When was the debt incurred?	Opened 09/06 Last Active 8/12/09	· ·
	mber Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Wh	no incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
deb		Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Automobile	}	
	ddition Financial	Last 4 digits of account number	0002	\$0.00
Att 100	npriority Creditor's Name tn: Bankruptcy Dept 00 Primera Blvd	When was the debt incurred?	Opened 02/06 Last Active 5/11/09	
Nur	Ike Mary, FL 32746 mber Street City State Zip Code no incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
deb		Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	•	
	ddition Financial	Last 4 digits of account number	0001	\$0.00
Att 100	npriority Creditor's Name tn: Bankruptcy Dept 00 Primera Blvd	When was the debt incurred?	Opened 03/15 Last Active 9/08/16	
<u>La</u> Nur	tke Mary, FL 32746 mber Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	no incurred the debt? Check one.	,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
_	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
deb	•	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	$\square$ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify     Unsecured		

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	or 1 <b>Aaron C Hamlin</b> or 2 <b>Kimberly E Hamlin</b>		Case number (if known) 6:19-bk-04030	
4.5	Addition Financial	Last 4 digits of account number	0007	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 1000 Primera Blvd Lake Mary, FL 32746 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	Opened 11/07 Last Active 3/09/15	·
	Who incurred the debt? Check one.	70 or mo date you me, me orani	S. Chook all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□ Yes	Other. Specify Check Cree	dit Or Line Of Credit	
4.6	Addition Financial	Last 4 digits of account number	0001	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 1000 Primera Blvd Lake Mary, FL 32746	When was the debt incurred?	Opened 04/09 Last Active 5/11/11	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir		
	Yes	Other. Specify Automobile	9	
4.7	Advent Health Nonpriority Creditor's Name	Last 4 digits of account number	3122	\$580.94
	PO Box 14000 Belfast, ME 04915	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	□ Yes	■ Other. Specify Medical bil		
		- Other. Specify	<del>-</del>	

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	or 1 Aaron C Hamlin or 2 Kimberly E Hamlin	Case number (if known) 6:19-bk-040	30
4.8	Advent Health	Last 4 digits of account number 6816	\$2,809.33
	Nonpriority Creditor's Name PO Box 864423	When was the debt incurred?	. ,
	Orlando, FL 32886-4423  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent	
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.9	Advent Health Nonpriority Creditor's Name	Last 4 digits of account number 3360	\$2,809.33
	PO Box 864423 Orlando, FL 32886-4423	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify Medical bill	
4.1	Advent Health	Last 4 digits of account number 9592	\$2,809.33
	Nonpriority Creditor's Name PO Box 864423 Orlando, FL 32886-4423	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical bill	

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	Aaron C Hamlin Kimberly E Hamlin		Case number (if known)	6:19-bk-04030
4.1	AdventHealth MED GRP	Last 4 digits of account number	3122	\$67.39
<u> </u>	Nonpriority Creditor's Name ATTN#17805K PO Box 14000 Belfast, ME 04915-4033	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
		Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not
	Is the claim subject to offset?	report as priority claims	a plane, and other similar de	hto
	No	☐ Debts to pension or profit-sharin		DIS
	Yes	Other. Specify Medical bill		
4.1	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	1554	\$626.00
	Attn: Correspondence Po Box 8801	When was the debt incurred?	Opened 09/05 Last 1/20/19	Active
	Wilmington, DE 19899  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,		
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only	<u> </u>		
	_	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	☐ Student loans	. Olullii	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not
	■ No	☐ Debts to pension or profit-sharin	hts	
	□ Yes	Other. Specify Credit Card		
4.1	Post Puvlohna		8363	\$0.00
3	Best Buy/cbna Nonpriority Creditor's Name	Last 4 digits of account number	<del></del>	<del>`</del>
		When was the debt incurred?	Opened 4/19/13 La 8/19/13	ast Active
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	bts
	Yes	■ Other. Specify Charge Acc	count	
		-17		

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	Aaron C Hamlin Kimberly E Hamlin	Case number (if known) 6:19-bk-04030	
4.1 4	Capital Management Services	Last 4 digits of account number 0302	\$1,874.80
	Nonpriority Creditor's Name 698 1/2 South Ogden Street Buffalo, NY 14206-2317	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unsecured	
4.1 5	CFE	Last 4 digits of account number 0045	\$383.22
	Nonpriority Creditor's Name 1000 Primera Blvd Lake Mary, FL 32746	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.1	CFE	Last 4 digits of account number 0045	\$600.00
	Nonpriority Creditor's Name 1000 Primera Blvd	When was the debt incurred?	
	Lake Mary, FL 32746  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unsecured	

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	1 Aaron C Hamlin 2 Kimberly E Hamlin		Case number (if known) 6:19-bk-040	30
4.1 7	Chase Auto Finance	Last 4 digits of account number	5908	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 901076 Fort Worth, TX 76101	When was the debt incurred?	Opened 04/13 Last Active 12/18/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin  ☐ Other. Specify Automobile		
4.1	Chase Card Services	Last 4 digits of account number	3766	\$15,492.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 10/06 Last Active 8/21/16	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin		
	□ Yes	Other. Specify Credit Card	• •	
4.1	Chase Mortgage	Last 4 digits of account number	6171	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 24696 Columbus, OH 43224	When was the debt incurred?	Opened 04/11 Last Active 12/01/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Farmers Ho	ome Administration FHMA	

	or 1 Aaron C Hamlin or 2 Kimberly E Hamlin		Case number (if known) 6:19-bk-04030		
4.2 0	Chase Mortgage	Last 4 digits of account number	7033	\$0.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Mc: Oh4-7302 Po Box 24696 Columbus, OH 43224	When was the debt incurred?	Opened 6/05/06 Last Active 5/24/10		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Real Estate	Mortgage		
4.2 1	Citi/Sears Nonpriority Creditor's Name	Last 4 digits of account number	6547	\$0.00	
	Citibank/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 10/01/96 Last Active 9/13/15		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing			
	Yes	Other. Specify Credit Card	<u> </u>		
4.2	Citibank/The Home Depot  Nonpriority Creditor's Name	Last 4 digits of account number	0302	\$1,874.00	
	Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 05/06 Last Active 8/20/16		
	St Louis, MO 63179  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□ Yes	■ Other Specify Charge Acc			

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Clear Contact Solutions Nonpriority Creditor's Name	Last 4 digits of account number	0553	\$83.2
PO Box 530313 Baltimore, MD 21264	When was the debt incurred?		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Unsecured		
Comenity Bank/Friedman Jewelers	Last 4 digits of account number	7152	\$0.0
Nonpriority Creditor's Name	·		
Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 12/07 Last Active 1/30/09	
Columbus, OH 43218	When was the dest mounted.	1730/03	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Comenity Capital/Zales	Last 4 digits of account number	7345	\$0.0
Nonpriority Creditor's Name  Attn: Bankrutptcy Dept		Opened 12/14 Last Active	
Po Box 18215	When was the debt incurred?	11/18	
Columbus, OH 43218	As of the determination the claims	in Charle all that analy	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	☐ Debts to pension or profit-sharing	= -	
□Yes	■ Other. Specify Charge Acc	count	

	1 Aaron C Hamlin 2 Kimberly E Hamlin		Case number (if known) 6:19-bk-0403	30
4.2	Credit First National Association	Last 4 digits of account number	9088	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 81315 Cleveland, OH 44181 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	Opened 11/13 Last Active 7/21/14	
	Who incurred the debt? Check one.	7.6 of the date you me, the claim	o. Oncor all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify Charge Acc	count	
, ,	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0418	\$9,050.00
	Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 04/12 Last Active 4/08/15	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	<u>                                     </u>	
9	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	1213	\$8,825.00
	Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 12/12 Last Active 5/31/19	
_	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	ıl	

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	1 Aaron C Hamlin 2 Kimberly E Hamlin		Case number (if known)	6:19-bk-04030	
	Dept of Ed / Navient	Last 4 digits of account number	0822		\$7,349.00
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 08/13 Last 5/31/19	Active	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce t	hat you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar deb	ots	
	Yes	☐ Other. Specify			
		Educationa	I		
ı • ı	Dept of Ed / Navient	Last 4 digits of account number	0822		\$4,820.00
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635	When was the debt incurred?	Opened 08/13 Last 5/31/19	Active	
	Wilkes Barr, PA 18773  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	No	Debts to pension or profit-sharing	g plans, and other similar deb	ots	
	Yes	Other. Specify			
		Educationa	l		
'	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	1213		\$3,719.00
	Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 12/12 Last 5/31/19	Active	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed	l alaim.		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	і сіаіМ:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a sepa report as priority claims</li></ul>	ration agreement or divorce t	hat you did not	
	No	□ Debts to pension or profit-sharin	n nlans, and other similar deb	nts	
	■ No □ Yes	<u> </u>	g plans, and other similal dec		
	Li res	Other. Specify			

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	1 Aaron C Hamlin 2 Kimberly E Hamlin		Case number (if known)	6:19-bk-04030	
	Dept of Ed / Navient	Last 4 digits of account number	0418		\$3,656.00
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 04/12 Last 5/31/19	Active	
=	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce t	hat you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar del	ots	
	☐ Yes	☐ Other. Specify			
		Educationa	ıl		
ı • ı	Dept of Ed / Navient	Last 4 digits of account number	0717		\$1,863.00
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635	When was the debt incurred?	Opened 07/14 Last 5/31/19	Active	
-	Wilkes Barr, PA 18773  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce t	hat you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar del	ots	
	☐ Yes	Other. Specify			
		Educationa	<u>l</u>		
-	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0717		\$1,194.00
	Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 07/14 Last 5/31/19	Active	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	_			
	☐ Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	Latata.		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	ı cıaım:		
	☐ Check if this claim is for a community debt	■ Student loans  ☐ Obligations arising out of a sepa	ration agreement or divorce t	hat you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similer del	ata	
	■ No		y pians, and other similar der	ло	
	Yes	Other. Specify			

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Nonpriority Creditor's Name Attn: Bankruptcy 24700 Chagrin Blvd, Ste 205 Cleveland, OH 44122 Number Street City State Zip Code When was the debt incurred?	Last 4 digits of account number	7007	\$416.00
Attn: Bankruptcy 24700 Chagrin Blvd, Ste 205	When was the debt incurred?	Opened 08/18	
	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Collection A  Other. Specify Emergency	Attorney Phys Of Central FI	
Kohls/Capital One	Last 4 digits of account number	3181	\$475.00
Nonpriority Creditor's Name	_		
Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 09/08 Last Active 1/20/19	
Salt Lake City, UT 84130	When was the debt incurred:	1/20/19	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	Other. Specify Charge Acc	count	
Midland Funding	Last 4 digits of account number	9428	\$2,721.00
Nonpriority Creditor's Name 2365 Northside Dr Ste 300	When was the debt incurred?	Opened 02/18	
San Diego, CA 92108  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
□ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	<u> </u>		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	

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	or 1	Case number (if known) 6:19-bk-04030	
4.3 8	Nemours Children Primary	Last 4 digits of account number 2997	\$136.03
	Nonpriority Creditor's Name PO Box 530313	When was the debt incurred?	
	Atlanta, GA 30353-0313  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.3 9	Orlando Health	Last 4 digits of account number 4877	\$142.89
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only		
		☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.4 0	Orlando Health	Last 4 digits of account number 6846	\$811.19
	Nonpriority Creditor's Name PO Box 9199936	When was the debt incurred?	
	Orlando, FL 32891-9936  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	☐ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	

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Debte Debte	or 1 <b>Aaron C Hamlin</b> or 2 <b>Kimberly E Hamlin</b>	Case number (if known) 6:19-bk-04030	
4.4	Physician Business Alliance	Last 4 digits of account number 4845	\$16.94
	Nonpriority Creditor's Name 2020 Oakley Seaver Drive Clermont, FL 34711-1902	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.4	Quest Diagnostics	Last 4 digits of account number 7110	\$56.24
2	Nonpriority Creditor's Name PO Box 740781	When was the debt incurred?	<del>450.24</del>
	Cincinnati, OH  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.4	Quest Diagnostics	Last 4 digits of account number 8383	\$173.31
	Nonpriority Creditor's Name PO Box 740781	When was the debt incurred?	
	Cincinnati, OH  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical bill	

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	or 1 Aaron C Hamlin or 2 Kimberly E Hamlin		Case number (if known) 6:19-bk-040	30
4.4 4	Sterling Jewelers, Inc.	Last 4 digits of account number	9049	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1799 Akron, OH 44309	When was the debt incurred?	Opened 12/10 Last Active 12/06/11	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing	• •	
	Yes	■ Other. Specify Charge Acc	count	
4.4 5	Sun Path MDL	Last 4 digits of account number	3996	\$25.14
	Nonpriority Creditor's Name 5429 Beaumont Circle Blvd #850	When was the debt incurred?		
	Tampa, FL 33624-5247  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	■ Other. Specify _ Unsecured		
4.4	Syncb/home Design Furn  Nonpriority Creditor's Name	Last 4 digits of account number	7412	\$0.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 10/27/11 Last Active 4/11/12	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	a plans, and other similar debts	
	■ No			
	Yes	Other. Specify Charge Acc	Sount	

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	r 1 Aaron C Hamlin r 2 Kimberly E Hamlin		Case number (if known) 6:19-bk-04030	1
4.4 7	Syncb/Rooms To Go	Last 4 digits of account number	2819	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 6/11/12 Last Active 2/17/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.4	Synchrony Bank	Last 4 digits of account number	9690	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 12/29/14 Last Active 3/17/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.4 9	Target Nonpriority Creditor's Name	Last 4 digits of account number	4114	\$1,881.00
	Attn: Bankruptcy Po Box 9475 Minneapolis, MN 55440	When was the debt incurred?	Opened 08/16 Last Active 2/26/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated☐ Disputed		
	Debtor 1 and Debtor 2 only			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	

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\$0.00
\$0.00
\$0.00

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	Aaron C Hamlin  Kimberly E Hamlin	Case number (if known) 6:19-bk-04030	
4.5	Unifund CCR, LLC	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name c/o Jonathan R Singer, Esq O&L Law Group, P.L. 4818 West Gandy Blvd. Tampa, FL 33611	When was the debt incurred?	
_	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify <b>2019-CC-0663</b>	
4.5	UPromise	Last 4 digits of account number 1554	\$626.54
	Nonpriority Creditor's Name PO Box 13337 Philadelphia, PA 19101-3337	When was the debt incurred?	
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Unsecured	
5	US Anesthesia	Last 4 digits of account number	\$380.00
	Nonpriority Creditor's Name PO Box 744573 Atlanta, GA 30374-4573	When was the debt incurred?	
_	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	

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	Aaron C Hamlin Kimberly E Hamlin		Case number (if known) 6:19-bk-0403	30
4.5 6	Verizon Wireless	Last 4 digits of account number	0001	\$0.00
	Nonpriority Creditor's Name Attn: Verizon Wireless Bankruptcy Admini 500 Technology Dr, Ste 550 Weldon Spring, MO 63304	When was the debt incurred?	Opened 08/14 Last Active 7/17/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	Other. Specify Unsecured	·	
4.5	Wells Fargo Dealer Services	Last 4 digits of account number	6880	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 19657 Irvine, CA 92623	When was the debt incurred?	Opened 07/09 Last Active 5/11/11	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	9	
4.5 8	Zealandia Capital Inc.  Nonpriority Creditor's Name	Last 4 digits of account number	1059	\$3,492.07
	39 Patton Avenue Asheville, NC 28801	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	o plans, and other similar debts	
	■ No □ Yes			
	□ 162	Other. Specify Unsecured		

Part 3: List Others to Be Notified About a Debt That You Already Listed

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Debtor 1	Aaron C Hamlin		
Debtor 2	Kimberly E Hamlin	Case number (if known)	6:19-bk-04030

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address Richard A. Russell, Esq. Federated Law Group, PLLC 887 Donald Ross Rd.

North Palm Beach, FL 33408

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.37 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

2255

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	40,476.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	49,389.89
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	89,865.89

ill in this infor	mation to identify your	case:		
Debtor 1	Aaron C Hamlin			
	First Name	Middle Name	Last Name	
Debtor 2 Kimberly E Hamlin				
(Spouse if, filing) First Name		Middle Name	Last Name	
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	FLORIDA	
Case number	6:19-bk-04030			
(if known)				

#### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1			, , . , ,		
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4					_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

#### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 35 of 57

Fill in this	s information to identify yo	ur case:			
Debtor 1	Aaron C Hamli	n			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	Kimberly E Ha	mlin Middle Name	Last Name		
	ates Bankruptcy Court for the				
Cooo num	shor 0.40 lata 0.4000				
Case num (if known)	6:19-bk-04030				☐ Check if this is an
					amended filing
Officia	J Form 106U				
	II Form 106H	al a la 4 a ma			
Sched	dule H: Your Co	deptors			12/15
our name	e and case number (if know	vn). Answer every questio	n.		of any Additional Pages, write
1. Do	you have any codebtors?	(if you are filing a joint case	, ao not list eitner spouse	as a codeptor.	
■ No					
Arizor	thin the last 8 years, have yna, California, Idaho, Louisia . Go to line 3. s. Did your spouse, former s	na, Nevada, New Mexico, P	uerto Rico, Texas, Washi		states and territories include
in line Form	e 2 again as a codebtor on	ly if that person is a guara	ntor or cosigner. Make	sure you have listed th	y with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State ar	d ZIP Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	<b>1</b>
0.1	Name			_ □ Schedule E/F, lii	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	4
	Name			☐ Schedule E/F, lii	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	

Fill in this information to identify your case:	
Debtor 1 Aaron C Hamlin	
Debtor 2 Kimberly E Hamlin (Spouse, if filing)	
United States Bankruptcy Court for the: MIDDLE DISTRICT	OF FLORIDA
Case number 6:19-bk-04030	Check if this is:
(If known)	☐ An amended filing
	A supplement showing postpetition chapter 13 income as of the following date:
Official Form 106I	MM / DD/ YYYY
Schedule I: Your Income	12/1

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. If you have more than one job, Employed ■ Employed **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Sales Supervisor Bookkeeper** Include part-time, seasonal, or Employer's name Coke Cola **Self Employed** self-employed work. **Employer's address** Occupation may include student 2900 Mercey Drive or homemaker, if it applies. Orlando, FL 32808 How long employed there?

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

			non	non-filing spouse		
2.	\$	0.00	\$	0.00		
۷.	Ψ	0.00	Ψ_	0.00		
3.	+\$	0.00	+\$	0.00		
4.	\$	0.00	\$	0.00		

For Debtor 2 or

For Debtor 1

Official Form 106l Schedule I: Your Income page 1

Debt Debt		Aaron C Hamlin Kimberly E Hamlin			Case n	number ( <i>if k</i>	nown)	6:1	19-bk-04	030		
	•	•	_									
					For I	Debtor 1		F	or Debtor	2 or		
	_								on-filing s	•		
	Сор	y line 4 here	4.		\$	(	0.00	\$		0.0	00	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	(	0.00	\$		0.0	00	
	5b.	Mandatory contributions for retirement plans	5b	).	\$		0.00	\$		0.0	00	
	5c.	Voluntary contributions for retirement plans	50	).	\$		0.00	\$		0.0	00	
	5d.	Required repayments of retirement fund loans	50	d.	\$	(	0.00	\$		0.0	00	
	5e.	Insurance	56		\$		0.00	\$		0.0		
	5f.	Domestic support obligations	5f		\$		0.00	\$		0.0		
	5g.	Union dues	50	-	\$		0.00	\$			00	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$		0.00	+ \$		0.0	00_	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		0.00	\$		0.0	00	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	(	0.00	\$		0.0	00	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	88	a.	\$	(	0.00	\$	1	,634.8	83	
	8b.	Interest and dividends	8b	).	\$	(	0.00	\$		0.0	00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	<b>.</b>	\$		0.00	\$		0.0	00	
	8d.	Unemployment compensation	80		\$		0.00	\$			00	
	8e.	Social Security	86		\$		0.00	\$		0.0		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f		\$		0.00	\$		0.0	00	
	8g.	Pension or retirement income	80	-	\$		0.00	\$		0.0		
	8h.	Other monthly income. Specify:	8r	1.+	\$	(	0.00	+ \$		0.0	00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.00	\$		1,634	.83	
10	Cala	vulate monthly income. Add line 7 u line 0	10.	¢.		0.00	. [		1 624 02	= \$		624.02
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		0.00	<b>-</b>   <b>-</b>   Ψ.		1,634.83	<del>-</del>   Φ		,634.83
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00											
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes								\$_ Com	bine	
12	Dos	ou expect an increase or decrease within the year after you file this form	2							mon	thly	income
10.	<b>I</b>	No.	•									
		Yes. Explain:										

Official Form 106l Schedule I: Your Income page 2

E-11 -						
	n this information to identify your case:					
Debte	Aaron C Hamlin		Check if this is:  An amended filing			
Debte	or 2 Kimberly E Hamlin use, if filing)		_ A	supplement show	ving postpetition chapter the following date:	
Unite	d States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA		N	IM / DD / YYYY		
Case	number <b>6:19-bk-04030</b>					
(If kn	own)					
Of	ficial Form 106J					
Sc	hedule J: Your Expenses				12/15	
info	is complete and accurate as possible. If two married people ar rmation. If more space is needed, attach another sheet to this t ber (if known). Answer every question.	e filing together, bo form. On the top of	oth are equal any addition	ly responsible fo al pages, write y	r supplying correct our name and case	
Part						
1.	Is this a joint case?  ☐ No. Go to line 2.					
	■ Yes. Does Debtor 2 live in a separate household?					
	■ No					
	<ul><li>No</li><li>☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses</li></ul>	for Separate Housel	hold of Debto	r 2.		
2.	Do you have dependents? ☐ No					
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state the				□ No	
	dependents names.	Daughter		2 months	■ Yes □ No	
		Daughter		2	■ Yes	
		Son		13	□ No ■ Yes	
					□ No	
3.	Do your expenses include				☐ Yes	
0.	expenses of people other than yourself and your dependents?					
expe	Estimate Your Ongoing Monthly Expenses mate your expenses as of your bankruptcy filing date unless yenses as of a date after the bankruptcy is filed. If this is a supplicable date.					
the v	ude expenses paid for with non-cash government assistance it value of such assistance and have included it on Schedule I: You cial Form 106I.)			Your expe	enses	
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		1,152.49	
	If not included in line 4:					
	4a. Real estate taxes		4a. \$		0.00	
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00	
	<ul><li>4c. Home maintenance, repair, and upkeep expenses</li><li>4d. Homeowner's association or condominium dues</li></ul>		4c. \$ 4d. \$		150.00 50.00	
5.	Additional mortgage payments for your residence, such as ho	me equity loans	5. \$		0.00	

	btor 1 Aaron C Hamlin btor 2 Kimberly E Hamlin	Case number (if known)	6:19-bk-04030
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a. \$	300.00
	6b. Water, sewer, garbage collection	6b. \$	100.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	210.00
	6d. Other. Specify:	6d. \$	0.00
7.	Food and housekeeping supplies	7. \$	350.00
8.	Childcare and children's education costs	8. \$	500.00
9.	Clothing, laundry, and dry cleaning	9. \$	0.00
10.	Personal care products and services	10. \$	75.00
11.	Medical and dental expenses	11. \$	50.00
12.	Transportation. Include gas, maintenance, bus or train fare.	40 ft	350.00
40	Do not include car payments.	12. \$	
	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	200.00
	Charitable contributions and religious donations	14. \$	200.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 2 15a. Life insurance	). 15a. \$	0.00
	15b. Health insurance	15a. \$	
			0.00
	15c. Vehicle insurance	15c. \$	160.00
10	15d. Other insurance. Specify:	15d. \$	0.00
	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 of Specify:	r 20. 16. \$	0.00
17.	Installment or lease payments:	470 ¢	0.00
	17a. Car payments for Vehicle 1	17a. \$	0.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
18.	Your payments of alimony, maintenance, and support that you did not deducted from your pay on line 5, Schedule I, Your Income (Official Fo	report as rm 1061) 18. \$	0.00
19.	Other payments you make to support others who do not live with you.	\$	0.00
00	Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form of		0.00
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
21.	Other: Specify:	21. +\$	0.00
22.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	3,847.49
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Forr	106J-2 \$	
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,847.49
23	Calculate your monthly net income.		
_0.	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,634.83
	23b. Copy your monthly expenses from line 22c above.	23b\$	3,847.49
	200. Copy your monthly expended non-line 220 above.	Σ35Ψ	3,041.45
	23c. Subtract your monthly expenses from your monthly income.		
	The result is your monthly net income.	23c. \$	-2,212.66
24.	Do you expect an increase or decrease in your expenses within the ye For example, do you expect to finish paying for your car loan within the year or do you modification to the terms of your mortgage?  No.		crease or decrease because of a

Fill in this info	rmation to identify you	r case:		
Debtor 1	Aaron C Hamlin	1		
	First Name	Middle Name	Last Name	
Debtor 2	Kimberly E Ham	ılin		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number	6:19-bk-04030			☐ Check if this is an
				amended filing
	rm 106Dec tion About	an Individua	l Debtor's Sched	ules 12/15
16 4			and the far arms below a second to far	
ir two married	people are filing togeth	er, both are equally respons	onsible for supplying correct infor	rmation.
You must file th	his form whenever you	file bankruptcy schedule	es or amended schedules. Making	a false statement, concealing property, or
			ıkruptcy case can result in fines u	p to \$250,000, or imprisonment for up to 20
years, or both.	18 U.S.C. §§ 152, 1341,	, 1519, and 35/1.		
Si	gn Below			
Did you p	oay or agree to pay som	neone who is NOT an atto	orney to help you fill out bankrupto	cy forms?
■ No				
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	nalty of perjury, I declar are true and correct.	e that I have read the sur	nmary and schedules filed with th	is declaration and
X /s/ Aa	aron C Hamlin		X /s/ Kimberly E Har	nlin
Aaro	n C Hamlin			
Signat			Kimberly E Hamlir	
-19.14	ture of Debtor 1		Signature of Debtor 2	

Date **July 11, 2019** 

Date **July 11, 2019** 

Fill in th	is information to identify	your case:						
Debtor 1	Aaron C Ham	lin						
	First Name	Middle Name	Last Name					
Debtor 2	Kimberly E H	amlin						
(Spouse if,	filing) First Name	Middle Name	Last Name					
United S	tates Bankruptcy Court for t	he: MIDDLE DISTRICT OF	FLORIDA					
Case nu (if known)	mber <u>6:19-bk-04030</u>				Check if this is an amended filing			
State Be as co informat	mplete and accurate as po	al Affairs for Indiving parties of two married people led, attach a separate sheet to question.	are filing together, both are	equally responsible for su				
Part 1:	Give Details About Your	Marital Status and Where Yo	u Lived Before					
1. Wha	at is your current marital s	tatus?						
	Married							
	Not married							
2. Duri	During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
Del	otor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there			
		u ever live with a spouse or le California, Idaho, Louisiana, No						
	No Yes. Make sure you fill out	Schedule H: Your Codebtors (C	Official Form 106H).					
Part 2	Explain the Sources of	Your Income						
Fill i	n the total amount of income	n employment or from operati e you received from all jobs and you have income that you receiv	all businesses, including part	-time activities.	lendar years?			
		Debtor 1		Debtor 2				
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			

Official Form 107

### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 42 of 57

	otor 1 otor 2		ron C Ha mberly E					Ca	se number (if known)	6:19-bk-0	04030
5.	Did you receive any other income during this year or the two previous calendar years?  Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  List each source and the gross income from each source separately. Do not include income that you listed in line 4.										
	_	No Yes.	Fill in the d	etails.							
	Debtor			Debtor 1				Debtor 2			
					Sources of Describe I	of income below.	each (befor	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3:	List	Certain Pa	ayments You	Made Befo	ore You Filed for	r Bankrup	otcy			
6.	_	e <b>ithe</b> No.	Neither D individual	ebtor 1 nor I primarily for a	Debtor 2 ha a personal, f	amily, or househ	sumer del old purpos	ots. Consumer deb se."	ots are defined in 11	·	1(8) as "incurred by an
			□ No. □ Yes	Go to line 7 List below paid that cr	r. each creditoreditoreditor. Do n payments t	or to whom you pa not include payments on an attorney for	aid a total ents for do this bankr	of \$6,825* or more mestic support obl uptcy case.	e in one or more pay	ments and thild support a	ne total amount you nd alimony. Also, do
	•	Yes.			ore you filed	e primarily cons			al of \$600 or more?		
			☐ Yes	List below include pay	each credito	lomestic support			nd the total amount pport and alimony.		t creditor. Do not nclude payments to an
	Cred	ditor'	s Name an	d Address		Dates of paym	nent	Total amount paid	Amount you still owe	Was this p	payment for
7.	Inside of wh	ers in ich y sines:	clude your ou are an o	relatives; any fficer, director	general par , person in	rtners; relatives o control, or owner	of any general of 20% or	nt on a debt you or eral partners; partn more of their votir		u are a gene ny managing	ral partner; corporations agent, including one fo
	_	No Yes.	List all payr	ments to an ir	sider.						
	Insid	der's	Name and	Address		Dates of paym	nent	Total amount paid	Amount you still owe	Reason fo	or this payment
8.	insid	er?				ey, did you make		•		count of a	debt that benefited an
	_	No Yes	l ist all nav	ments to an ir	sider						
			Name and			Dates of paym	nent	Total amount paid	Amount you still owe		or this payment editor's name
								paid	2 0 0		

	ebtor 1 Aaron C Hamlin Ebtor 2 Kimberly E Hamlin		Case number (if	known)	6:19-bk-04	030
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in a				
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>					
	Case title Case number					
	UNIFUND CCR, LLC v. AARON C HAMLIN 2019-CC-0663	UND CCR, LLC v. AARON C Civil Lake County Courthouse LIN 550 W Main Street		<b>;</b>	■ Pending □ On appeal □ Concluded	
	MIDLAND FUNDING LLC vs. AARON HAMLIN 2019-SC-002255	Civil	Lake County Courthouse 550 W Main Street Tavares, FL 32778	•	■ Pending □ On appea □ Conclude	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		perty repossessed, foreclosed,	garnish	ned, attached	, seized, or levied?
	No. Go to line 11.					
	Yes. Fill in the information below.	December the Duese outer		Date		Value of the
	Creditor Name and Address	Explain what happened				Value of the property
	NEED			Febru	ary 2018	\$0.00
		■ Property was reposs □ Property was foreclo □ Property was garnish □ Property was attached	sed. ned.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan solve the solve to make a payment becan solve the		cluding a bank or financial inst	itution,	set off any a	mounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date a taken	ction was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		erty in the possession of an as	ssignee	for the bene	fit of creditors, a
	■ No □ Yes					
Ра	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup  ■ No	tcy, did you give any gif	ts with a total value of more tha	an \$600	per person?	
	Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gif	you gave ts	Value
	Person to Whom You Gave the Gift and					

Debto Debto				Case number	(if known) 6:19-bk-04	030
4. <b>W</b>	/ithin 2 years before you filed for banl	cruptcy,	did you give any gifts or contribution	ns with a tota	I value of more than	\$600 to any charity?
_	- 140	contribut	tion			
n	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	Describe what you contributed		Dates you contributed	Value
Part 6	List Certain Losses					
	/ithin 1 year before you filed for bankı r gambling?	uptcy or	since you filed for bankruptcy, did y	you lose anyt	hing because of thef	t, fire, other disaster
	No					
	Yes. Fill in the details.					
	Describe the property you lost and	Descr	ibe any insurance coverage for the l	oss	Date of your	Value of property
п	now the loss occurred		e the amount that insurance has paid. In nce claims on line 33 of Schedule A/B:		loss	lost
Part 7	List Certain Payments or Transfe			, ,		
F F S U	Yes. Fill in the details.  Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Attorneys Justin Clark & Associate PLLC 500 Winderley Place Jnit 100 Maitland, FL 32751 wspivak@youhavepower.com		Description and value of any prop transferred  Total fees charged to client in \$1599 for Chapter 7 Attorneys \$66 Credit Report Fee, and \$3 Chapter 7 Court Filing Fees.	clude Fees,	Date payment or transfer was made  June 13, 2019	Amount of payment \$2,000.00
pı	Vithin 1 year before you filed for banks romised to help you deal with your croponot include any payment or transfer the	editors o	or to make payments to your creditor		or transfer any prope	rty to anyone who
_	_					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
tr: In	/ithin 2 years before you filed for bank ansferred in the ordinary course of you clude both outright transfers and transfer clude gifts and transfers that you have a No  Yes. Fill in the details.	our busir rs made	ness or financial affairs? as security (such as the granting of a s			
	Person Who Received Transfer		Description and value of	Describe a	any property or	Date transfer was
	Address		property transferred		received or debts	made
F	Person's relationship to you					

Case number (if known) 6:19-bk-04030

19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro-		y property to	a self-settle	d trust or similar device	of which you are a	
	Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pr	operty trans	sferred	Date Transfer was	
Par	tt 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and S	Storage Unit	s		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc	r other financial accou	nts; certificate	es of deposi		, ,	
	No	iduono, and other iniai	iolai montano	110.			
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	Type of account or instrument closed, sold moved, or transferred		Last balance before closing o transfe	
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for se cash, or other valuables?							
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit o	,	home within	1 year befor	re you filed for bankrupto	:y?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility	Who also has or h	and access	Describe	the contents	Do you still	
	Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)			the contents	have it?	
Par	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that sor for someone.	neone else owns? Inclu	ude any prope	erty you bor	rowed from, are storing f	or, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name	Where is the prop	erty?	Describe	the property	Value	
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, S Code)					
Par	tt 10: Give Details About Environmental Info	rmation					
For	the purpose of Part 10, the following definition	ons apply:					
	Environmental law means any federal, state, toxic substances, wastes, or material into th regulations controlling the cleanup of these	e air, land, soil, surface	e water, grour				
	Site means any location, facility, or property to own, operate, or utilize it, including dispo	as defined under any		l law, wheth	er you now own, operate	, or utilize it or used	
	to own, operate, or utilize it, including disposal sites.  Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						

Debtor 1 Aaron C Hamlin

Debtor 2

Kimberly E Hamlin

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Deb	tor 2 Kimberly E Hamlin		Case number (if known) 6:19-bk-0	4030				
24.	Has any governmental unit notified you that y ■ No □ Yes. Fill in the details.	under or in violation of an enviro	nmental law?					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of ar	ny release of hazardous material?						
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admir	nistrative proceeding under any envir	onmental law? Include settlemen	ts and orders.				
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Co	onnections to Any Business						
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have any	of the following connections to	any business?				
	☐ A sole proprietor or self-employed in a	a trade, profession, or other activity, e	either full-time or part-time					
	☐ A member of a limited liability compar		-					
	☐ A partner in a partnership							
	☐ An officer, director, or managing exec	utive of a corporation						
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation						
	■ No. None of the above applies. Go to Par	rt 12.						
	☐ Yes. Check all that apply above and fill in	the details below for each business.						
	Address	Describe the nature of the business	Employer Identification num Do not include Social Secur					
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	Dates business existed				
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No □ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)							
	(Trainibor, Otreet, Only, State and AIF Code)							

Debtor 1 Aaron C Hamlin

## Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 47 of 57

Debtor 1	Aaron C Hamlin				
Debtor 2	Kimberly E Hamlin			Case number (if known)	6:19-bk-04030
	_				
Part 12:	Sign Below				
are true a with a ba	ad the answers on this <i>Statement of Financial A</i> and correct. I understand that making a false st nkruptcy case can result in fines up to \$250,00 §§ 152, 1341, 1519, and 3571.	atement,	concealing property,	or obtaining money or	
/s/ Aaro	on C Hamlin	/s/ Kir	mberly E Hamlin		
Aaron (	C Hamlin	Kimbe	erly E Hamlin		
Signatur	re of Debtor 1	Signat	ure of Debtor 2		
Date _J	uly 11, 2019	Date	July 11, 2019		
Did you a	nttach additional pages to Your Statement of Fi	inancial A	Affairs for Individuals	Filing for Bankruptcy (	Official Form 107)?
■ No					
☐ Yes					
Did you p	pay or agree to pay someone who is not an atto	orney to h	nelp you fill out bankr	uptcy forms?	
■ No					
☐ Yes. N	ame of Person Attach the Bankruptcy Pet	tition Prer	parer's Notice, Declarat	ion, and Signature (Offici	al Form 119).

Fill in this infor	mation to identify your	case:		
Debtor 1	Aaron C Hamlin			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Kimberly E Haml	Middle Name	Last Name	
(Spouse II, IIIIIIg)	riist Naiile	Middle Name	Lastivallie	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRIC	CT OF FLORIDA	
Case number	6:19-bk-04030			
(if known)	0.13 DK 04000			☐ Check if this is an
				amended filing
O((: -: -1 E-	400			
Official Fo				
Stateme	nt of Intentic	on for Indiv	∕iduals Filing Under Cl	napter 7 12/15
				-
If you are an ind	lividual filing under cha	apter 7, you must fi	ll out this form if:	
creditors hav	e claims secured by yo	our property, or		
-	sed personal property		•	
			you file your bankruptcy petition or by the time for cause. You must also send cop	
on the		ne court extends th	le tillle for cause. Fou fliust also sellu cop	iles to the creditors and lessors you list
	eople are filing togethe nd date the form.	r in a joint case, bo	oth are equally responsible for supplying o	correct information. Both deptors must
· ·				
	and accurate as possilyour name and case nu		s needed, attach a separate sheet to this f	orm. On the top of any additional pages,
write y	our name and case na	mber (ii knowii).		
Part 1: List Y	our Creditors Who Hav	ve Secured Claims		
1 For any credit	tors that you listed in F	Part 1 of Schedule F	o: Creditors Who Have Claims Secured by	Property (Official Form 106D) fill in the
information be		art i oi ociicadic L		
Identify the cr	reditor and the property	that is collateral	What do you intend to do with the prop	
			secures a debt?	as exempt on Schedule C?
Creditor's L	oan Care Servicing		☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
Description of	. 0704 A	N=1	Retain the property and enter into a	■ Yes
	2701 Angel Mist C Mascotte, FL 3475		Reaffirmation Agreement.	
property securing debt	County	)3 Lake	☐ Retain the property and [explain]:	
securing debt	PARCEL ID			
	#10-22-24-0011-00	0-09900		
Part 2: List Y	our Unexpired Person	al Bronorty Loseos		
			in Schedule G: Executory Contracts and	Unexpired Leases (Official Form 106G), fill
in the information	on below. Do not list re	al estate leases. Ur	nexpired leases are leases that are still in	effect; the lease period has not yet ended.
You may assum	e an unexpired person	al property lease if	the trustee does not assume it. 11 U.S.C.	§ 365(p)(2).
Describe your u	unexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of leading Property:	ased			П У
. roporty.				☐ Yes
Lessor's name:				□ No
Description of lea	ased			•
Property:				∏ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

### Case 6:19-bk-04030-CCJ Doc 12 Filed 07/11/19 Page 49 of 57

Debto Debto		Aaron C Hamlin Kimberly E Hamlin			Case number (if known)	6:19-bk-04030
	•					
Lesso						□ No
Prope		of leased				☐ Yes
Lesso		ame: n of leased				□ No
Prope	•	i di leaseu				☐ Yes
Lesso		ame: n of leased				□ No
Prope	•	i oi leaseu				☐ Yes
Lesso						□ No
Prope		n of leased				☐ Yes
Lesso						□ No
Prope	•	n of leased				☐ Yes
Part 3:	: :	Sign Below				
		alty of perjury, I declare at is subject to an unex	that I have indicated my intention abo pired lease.	ut ar	ny property of my estate that se	cures a debt and any personal
		aron C Hamlin	X		/ Kimberly E Hamlin	
		n C Hamlin			imberly E Hamlin	
S	signa	ture of Debtor 1		Się	gnature of Debtor 2	
D	Date	July 11, 2019	D	ate	July 11, 2019	

Fill in this information to identify your case:					
Debtor 1	Aaron C Hamlin				
Debtor 2 (Spouse, if filing)	Kimberly E Hamlin				
United States Bankruptcy Court for the: Middle District of Florida					
Case number (if known)	6:19-bk-04030				

Check one box only as directed in this form and in Form 122A-1Supp:

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test* Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

☐ Check if this is an amended filing

#### Official Form 122A - 1

# **Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
  - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
    - ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
    - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					Debtor 1		 or 2 or filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and comm	nissio	ons (before all	\$	0.00	\$ 1,820.97
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payments	from	a spouse if	\$	0.00	\$ 0.00
4.	All amounts from any source which are regularly poor you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	t. Include re d, your dep	egulai ende	contributions nts, parents,	\$	0.00	\$ 0.00
5.	Net income from operating a business, profession,	or farm					
			Deb	otor 1			
	Gross receipts (before all deductions)	\$ 0	0.00				
	Ordinary and necessary operating expenses	-\$ 0	0.00				
	Net monthly income from a business, profession, or far	m \$ 0	0.00	Copy here ->	\$	0.00	\$ 0.00
6.	Net income from rental and other real property						
			Deb	otor 1			
	Gross receipts (before all deductions)	\$ 0	0.00				
	Ordinary and necessary operating expenses	-\$ 0	0.00				
	Net monthly income from rental or other real property	\$ 0	0.00	Copy here ->	\$	0.00	\$ 0.00
7.	Interest, dividends, and royalties				\$	0.00	\$ 0.00

Official Form 122A-1

6:19-bk-04030

Case number (if known)

			Column A Debtor 1		Column B Debtor 2	or	
Unemployment compensation			\$	0.00	\$	0.00	
Do not enter the amount if you contend that the am the Social Security Act. Instead, list it here:	ount received was	a benefit under					
For you		0.00					
For your spouse	\$	0.00					
<b>Pension or retirement income.</b> Do not include any benefit under the Social Security Act.	•		\$	0.00	\$	0.00	
Income from all other sources not listed above. Do not include any benefits received under the Socreceived as a victim of a war crime, a crime against domestic terrorism. If necessary, list other sources total below.	cial Security Act or p t humanity, or interr	oayments national or					
•			\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
Total amounts from separate pages, if any	<b>′</b> .	+	\$	0.00	\$	0.00	
. Calculate your total current monthly income. Ad each column. Then add the total for Column A to the			0.00	+ \$ _	1,820.97		1,820.97
t 2: Determine Whether the Means Test Appli  Calculate your current monthly income for the y		steps:				income	
12a. Copy your total current monthly income from li			Сор	y line 11	here=>	\$	1,820.97
,			•				.,
Multiply by 12 (the number of months in a yea	r)					<b>x</b> _1:	2
12b. The result is your annual income for this part of	of the form				12	2b. \$ <b>2</b>	1,851.64
. Calculate the median family income that applies	s to you. Follow the	ese steps:					
Fill in the state in which you live.	FL						
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Fill in the number of people in your household.	5						
Fill in the median family income for your state and s To find a list of applicable median income amounts	, go online using th		in the separa	ate instruc	tions 13	8. \$8	7,833.00
for this form. This list may also be available at the b	dikiupicy cierk s d	mice.					
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for this form. This list may also be available at the b. <b>How do the lines compare?</b> 14a. Line 12b is less than or equal to line 13	, ,		κ 1, <i>There i</i> s .	no presun	nption of abu	ise.	
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**Aaron C Hamlin** 

Kimberly E Hamlin

Debtor 1 Debtor 2

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

## United States Bankruptcy Court Middle District of Florida

In re	Kimberly E Hamlin		Case No.	6:19-bK-04030
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR M	IATRIX	
Γhe abo	ove-named Debtors hereby verify th	nat the attached list of creditors is true and cor	rect to the best	of their knowledge.
Date:	July 11, 2019	/s/ Aaron C Hamlin		
		Aaron C Hamlin		
		Signature of Debtor		
Date:	July 11, 2019	/s/ Kimberly E Hamlin		
		Kimberly E Hamlin		

Signature of Debtor

**Aaron C Hamlin** 

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B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Middle District of Florida

In re	Aaron C Hamlin Kimberly E Hamlin		Case No.	6:19-bk-04030			
	Killiseriy E Hallilli	Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPEN	NSATION OF ATTOI	RNEY FOR DI	EBTOR(S)			
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing the rendered on behalf of the debtor(s) in contemplation of	(b), I certify that I am the attorn g of the petition in bankruptcy,	ney for the above nar or agreed to be paid	ned debtor(s) and that to me, for services rendered or to			
	For legal services, I have agreed to accept		\$	1,599.00			
	Prior to the filing of this statement I have received			1,599.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	I have not agreed to share the above-disclosed compo	ensation with any other person	unless they are mem	bers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
1	<ul> <li>Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, states Representation of the debtor at the meeting of creditor. Representation as needed.</li> <li>[Other provisions as needed]         <ul> <li>Total fees charged to client include \$159</li> <li>Chapter 7 Court Filing Fees. Attorney's I market value; exemption planning; preparation and filing of motion goods.</li> </ul> </li> </ul>	ement of affairs and plan which ors and confirmation hearing, ar op for Chapter 7 Attorneys Fees charged include nego aration and filing of reaffir	may be required; and any adjourned hea Fees, \$66 Credit otiations with sec mation agreemen	urings thereof;  Report Fee, and \$335 for ured creditors to reduce to ts and applications as			
<b>6.</b> I	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay actions or			
		CERTIFICATION					
	certify that the foregoing is a complete statement of any ankruptcy proceeding.		payment to me for i	representation of the debtor(s) in			
this b				representation of the debtor(s) in			